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Bib Data Sheet

CONFIRMATION NO. 2885

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/732,695 | <b>FILING OR 371(c) DATE</b><br>12/08/2000<br><b>RULE</b> | <b>CLASS</b><br>725 | <b>GROUP ART UNIT</b><br>2623 | <b>ATTORNEY DOCKET NO.</b><br>HBK-02802/03 |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/170,109 12/10/1999

MWH

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
01/23/2001

\*\* SMALL ENTITY \*\*

|  |                               |                            |                           |                                 |
|--|-------------------------------|----------------------------|---------------------------|---------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>CT | <b>SHEETS DRAWING</b><br>4 | <b>TOTAL CLAIMS</b><br>72 | <b>INDEPENDENT CLAIMS</b><br>72 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                            |                           |                                 |
| Verified and Acknowledged <u>Michael P. Hoyle</u> <u>MWH</u><br>Examiner's Signature Initials  |                               |                            |                           |                                 |

ADDRESS

25006

TITLE

System for targeted advertisement, personal editing and parental control in a television network

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>355 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
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|                                   |   | <input type="checkbox"/> Other _____                           |
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